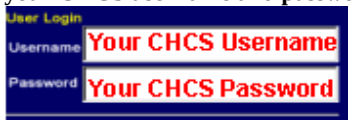
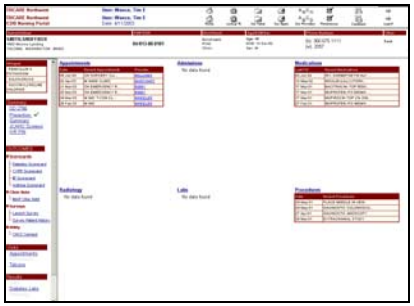
Clinic Note Quick Steps

Clinical Notes (AKA GDN II) is a consolidated group of screens that allow for clinical notes on a patient to be made and saved within ICDB.

STEP 1: **Log into the ICDB via the MAMC Intranet. or by entering the direct link. You then will use your CHCS username and password.**

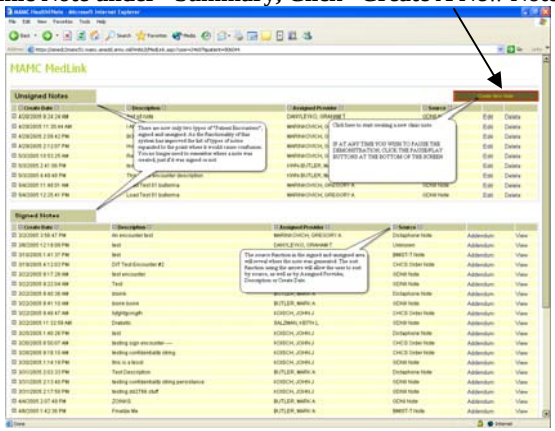


STEP 2: **Select an Individual Patient; the first screen encountered will be the Patient summary.**



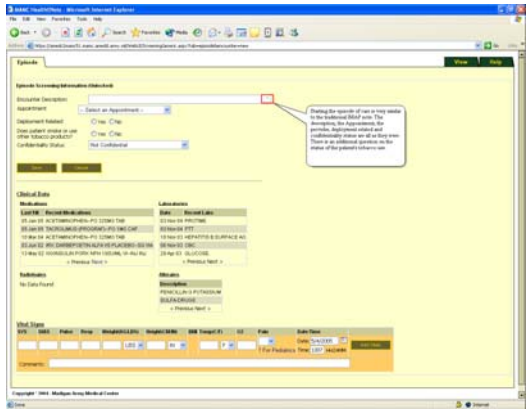
"Patient Summary Page"

STEP 3: **On the left side tool bar select New Clinic Note under "Summary, Click "Create A New Note".**



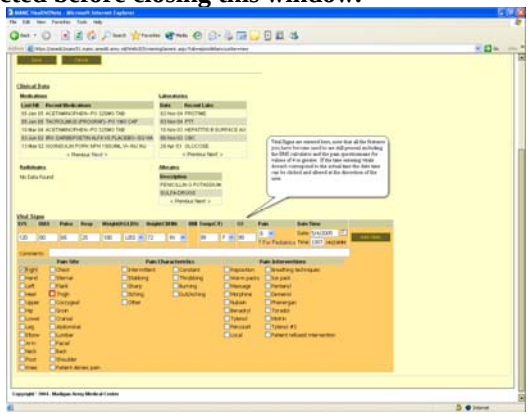
"New Clinic Note"/"Create A New Note"

STEP 4: **Enter the Screening Info for the Patient including appointment, provider and vital signs.**



"Add Patient Vitals"

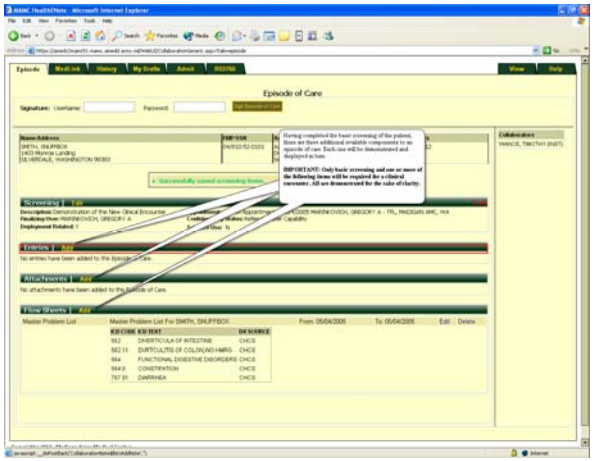
STEP 5: **Enter Patient Vital Signs in the space provided; ensure Add Vitals is selected before closing this window.**



"Enter Patient Vitals"

STEP 6: **Enter and update patient information on the DD 2766, this will automatically pop up when the assigned provider selects the patient note.**

STEP 7: **Select entries, attachments and or flow sheets in turn to complete the clinical encounter. Number of entries, encounters, attachments or flow sheets is up to the provider, there is no mandatory number.**

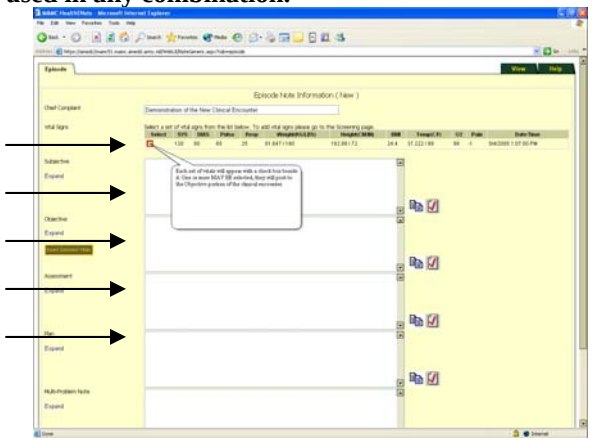


"Encounter Summary Page"

Note- If walk in is selected a provider will have to be selected using "look up provider", automatically shown when walk in is selected.

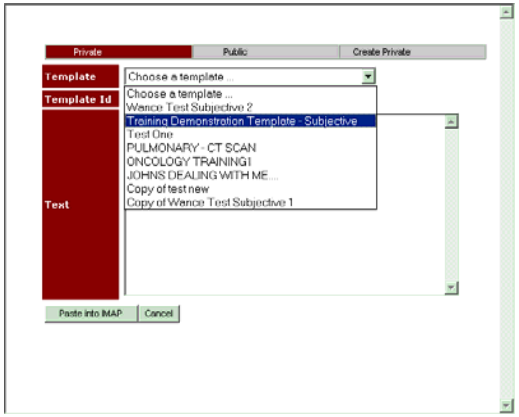
Continue with steps 8-13 on reverse of this document.

STEP 8: ENTRIES: Enter patient information in the free text boxes for Subjective, Objective, Assessment, and Plan or select Multi-Problem Note. These are free text boxes and can be used in any combination.



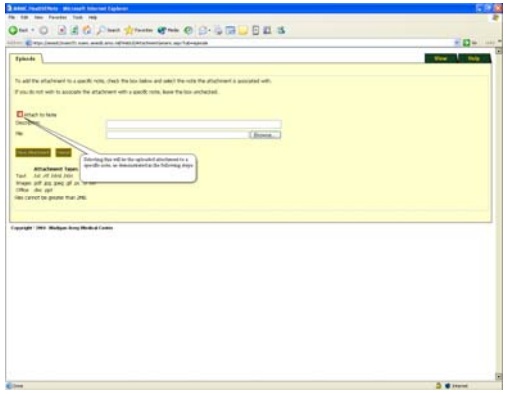
"Entries Page"

STEP 9: (OPTIONAL STEP) Select a template if you choose to by clicking on the select template icon to the right of each free text box (S.O.A.P.) and Multi-Problem note. This image reflects the Subjective but there is a template for each of the other sections as well. Select the needed template and click on "Paste" to insert the template data into the Clinic Note.



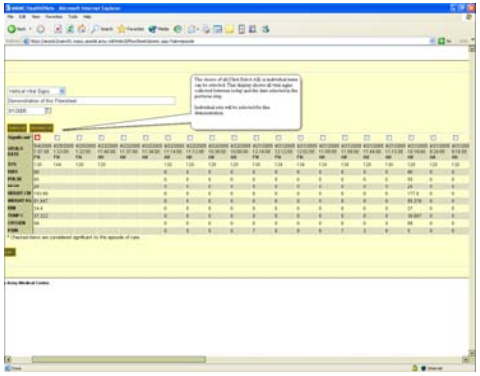
"Template Selection - Subjective"

STEP 10: Attachments: Notes can also include image files, PDF files, MS Word files, or text files by selecting the "Attachments" section of the encounter. Attachments are added to the encounter by clicking on the "Browse" button and selecting the file from the personal or network drive. File size limited to two MB, but as many attachments as are needed can be added.



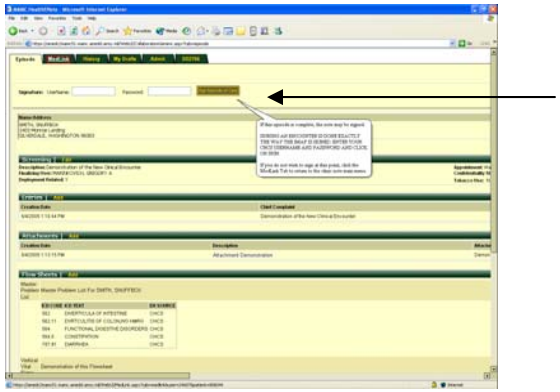
"Attachments"

STEP 11: Flowsheets: A flow sheet can be created using the flow sheet tool. Currently Vital signs and master problem lists are available.



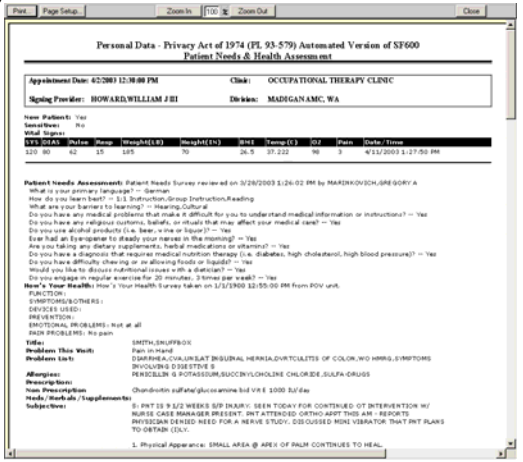
"Flow Sheets"

STEP 12: Save & Sign: Once a Clinic Note is complete it is saved, it will require a signature. Signing the note is done on the encounter summary page; enter your CHCS Username/Password to sign.



"Sign the Encounter"

STEP 13: Print: A copy can be printed as a draft or final version to be kept in the patient record. The clinic note prints on an SF600. Draft versions are visibly marked with the word "Draft" in light gray on the document.



"Clinic Encounter SF600"

This is a QUICK REFERENCE GUIDE and is not intended to address all functionality of the clinic note. It is intended to be a basic reference to Clinic note creation.